NOV 2 8 2003

4*F/#* 2828

		· · · · · · · · · · · · · · · · · · ·								
TRANSMITTAL			Application Number		09/778,897					
TRANSMITTAL FORM			Filing Date		February 8, 2001					
(to be used for all correspondence after initial filing)			First Named Inventor		Tatushi IGARASHI					
			Group Art Unit		2828					
			Examiner Name		T. Nguyen					
Total Number of Pages in This Submission 13			Attorney Docket Number		740145-193					
ENCLOSURES (check all that apply)										
Fee Transmittal Form		ment Papers		After Allowance Communication to Group						
Fee Attached			Application)		Appeal Communication to Board of Appeals and Interferences					
Amendment / Reply	Declarat	g(s) tion and Power of Attorney		Appeal Communication to Group						
After Final		ng-related Papers		(Appeal Notice, Brief, Reply Brief) Proprietary Information						
Affidavits/declaration(s)		☐ Petition			Status Letter					
Extension of Time Request				to Convert to a Provisional	Application Data Sheet  Request for Corrected Filing Receipt with					
Express Abandonment Request		Applicate Power of		f Attorney, Revocation	Enclosures					
Information Disclosure Statement		I .		of Correspondence Address	A self-addressed prepaid postcard for acknowledging receipt					
l <b>–</b>				al Disclaimer	Other Enclosure(s) (please identify below):					
Certified Copy of Priority Document(s)				for Refund mber of CD(s)	1ECH					
Response to Missing Parts/		CD, Nui		miber of CD(s)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
Incomplete Application					DEC -5					
Response to Missing Parts under 37 CFR 1.52 or 1.53					RECEIVED DEC -5 2003 ECHMOLOGY CENTE					
					200 ED					
		Remarks	The Commissioner is	hereb	y authorized to charge any additional fees					
			required or credit any overpayments to Deposit Account No. 22-2380 (740145-193) for the above identified docket number.							
	SIGNATU	RE OF APPL	JICANT, ATTORNEY, C	OR A	GENT					
Firm	David S. S	afran, Reg. 1								
or Individual name	Nixon Peabody LLP 401 9 <sup>th</sup> Street, N.W.									
	Suite 900		4							
Signature	wasningto	n D.C. 2000	<del>4</del> 00							
	November November	26 2003	d f							
Date	rtovember	20, 2003								
CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]										
I hereby certify that this correspondence is being:										
deposited with the	United Stat	es Postal Sei	rvice on the date shown	belo	w with sufficient postage as first					
class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450										
transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at										
November 26, 2003										
Date Signature K. M. McManus										
Typed or printed name										

## Complete if Known FEE TRANSMITTAL Application Number 09/778,897 Filing Date February 8, 2001 FOR FY 2004 Patent fees are subject to annual existion. Applicant claims small entity status. See SCFR 1.27 First Named Inventor Tatushi IGARASHI kaminer Name T. Nguyen Art Unit 2828 Attorney Docket No. 740145-193 TOTAL AMOUNT OF PAYMENT

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)							
Check Credit Card Money Other None	3. ADDITIONAL FEES			FEES	. <del>-</del>		0,	
Deposit Account:		Large Entity		Entity		Re =		
Deposit	Fee	Fee	Fee	Fee	Fee Desci	ription		
Account Number 19-2380(740145-193)	Code 1051	( <b>\$)</b> 130	2051	( <b>\$)</b> 65	Surcharge - late filing fee	or oath		
	1052	50	2052	25	Surcharge - late provisiona	al filing fee or cover		
Deposit	1053	.130	1053	130	heet Von-English specification		<del></del>	
Account Nixon Peabody LLP	1812	2,520	1812	2,520	or filing a request for ex	parte reexamination		
Name		920*	1804	920*	Requesting publication of			
The Commissioner is authorized to: (check all that apply)	1804		1		ction	•		
Charge fee(s) indicated below Credit any overpayments	1805	1.840*	1805	1,840*	Requesting publication of ection	SIR after Examiner		
Charge any additional fee(s)	1251	110	2251	55	Extension for reply within first month 110.00			
Charge fee(s) indicated below, except for the filing fee	1252	410	2252	205	Extension for reply within	second month		
to the above-identified deposit account.	1253	930	2253	465	Extension for reply within third month			
FEE CALCULATION	1254	1.450	2254	725	Extension for reply within	fourth month		
1. BASIC FILING FEE	1255	1,970	2255	985	Extension for reply within	fifth month		
Large Entity Small Entity Fee Fee Fee Fee Description	1401	320	2401	160	Notice of Appeal			
Code (S) Code (S) Fee Paid	1402	320	2402	160	Filing a brief in support of	an appeal		
	1403	280	2403	140	Request for oral hearing	-		
1001 750 2001 375 Utility filing fee	1451	1,510	1451	1,510	Petition to institute a publi	-		
1002 330 2002 165 Design filing fee	1452	110	2452	55	Petition to revive – unavoi			
1003 520 2003 260 Plant filing fee	1453	1.300	2453	650	Petition to revive – uninter			
1004 750 2004 375 Reissue filing fee	1501	1.300	2501	650	Jtility issue fee (or reissue	<b>:)</b>		
1005 160 2005 80 Provisional filing fee	1502 1503	470 630	2502 2503	235 315	Design issue fee			
SUBTOTAL (1) (S) (I	1460	130	1460	130	Plant issue fee Petitions to the Commissioner			
SUBTOTAL (I) (\$) 0	1807							
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		50 180	1807 1806	50 180	Processing fee under 37 CFR 1.17(q) Submission of Information Disclosure Stmt			
Fee from		40	8021	40	Recording each patent assignment per property			
Extra Claims below Fee Paid  Total Claims		750	2809	375	(times number of properties) Filing a submission after final rejection			
Total Claims20** = X = 0		730	2007		37 CFR 1.129(a))	•		
Independent -3** = X = 0		750	2810	375	for each additional invent 37 CFR 1.129(b))	ion to be examined		
Multiple Dependent X = 0		750	2801	375	Request for Continued Examination (RCE)			
Large Entity Small Entity	1802	900	1802	900	Request for expedited exa	mination of a design		
Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)	Ode	C (	( )		pplication			
1202 18 2202 9 Claims in excess of 20	Other	fee (speci	ıy)	<u> </u>				
1201 84 2201 42 Independent claims in excess of 3								
1203 280 2203 140 Multiple dependent claim. if not paid	*Redu	ced by Ba	asic Filin	g Fee Paid	SUBTOTAI	(3) (\$)110.00		
1204 84 2204 42 ** Reissue independent claims over				TEICATE (	MAILING OR TRANSA	AICCIONI (27 CED 1 9/a	an .	
original patent	l hen	eby certif				11351ON [37 CFK 1.0(a	" Г	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	I hereby certify that this correspondence is being:  deposited with the United States Postal Service on the date shown below with sufficient							
SUBTOTAL (2) (5) 0					nail in an envelope addres		Commissioner for	
**or number previously paid. if greater: For Reissues. see above	Patents, P. O. Box 1450, Alexandria, VA 22313-1450  transmitted by facsimile on the date shown below to the United States Patent and							
	Trademark Office at (703)							
	November 26, 2005  Date  November 26, 2005  Signature							
	Signature  K. M. McManus							
Typed or printed name								
SUBMITTED BY					Complete (i)			
Name (Print/Type) David S. Safran		ration N ney/Ager	o.	27,997	Telephone	(703) 827-809	4	
Signature O		ne yr Ager	,		Date	November 26,	2003	
- 10						1		